



Bart L. Graham
Commissioner

State of Georgia
Department of Revenue
Motor Vehicle Division
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Douglas Hooper
Director

Application for Issuance of a Special License Plate & Affidavit of Need & Eligibility

Section I. Suspended Driver's Information			
Full Legal Name:			Date of Birth:
Address Including City, State & Zip:			
Suspended Driver's Telephone Number Including Area Code:			
Driver's License #:		Surrendered License Plate #:	
Date of Conviction:		Court of Conviction:	
<p>Has driver been convicted of driving two (2) or more times under the influence of alcohol, drugs or other intoxicating substances within five (5) years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>*** Please attach proof of surrender of the license plate to the Court or local County Tag Agent.</p>			
Section II. Vehicle & Insurance Information			
Year & Make Vehicle:	Model Name or Number	Color:	Vehicle Identification Number:
Insurance Company's Name:		Policy Number	
Period of Coverage	From Date:	Thru Date:	
<p>*** Please attach a copy of the insurance information card provided by the insurer for this policy.</p>			
Section III. Alternate Driver Information			
I hereby certify that the individual named below is a member of my household and possesses a valid driver's license.			
Full Legal Name		Date of Birth:	Driver's License #:
Address Including City, State & Zip:			
Alternate Driver's Telephone Number Including Area Code:			

Vehicles Registered to Other Household Drivers (if more than one, add additional sheet)

Year & Make Vehicle

Model Name or Number

Vehicle Identification Number

Section IV. Statement of Need (Choose & complete one of the following):

☐ The co-owner of the vehicle, _____, is completely
(Co-owner's Name)
dependent upon the motor vehicle referenced in Section II for the necessities of life and would be
subject to undue hardship without such special license plate for the following reason(s):

or

☐ A member of the suspended driver's family, _____, is
(Family Member's Name)
completely dependent upon the motor vehicle referenced in Section II for the necessities of life and
would be subject to undue hardship without such special license plate for the following reason(s):

Section V. Notarized Signatures

Suspended Driver's Signature:

Date:

Alternate Driver's Signature:

Date:

Sworn to and subscribed before me this _____ of _____ 2_____.
(Day) (Month) (Year)

(Notary Public's Signature & Notary Seal or Stamp)_____
(Date Notary Commission Expires)**Section VI. Department's Decision**

☐ Approved – Issue Temporary Operating Permit for "AI" plate category.

☐ Denied

DOR SEAL_____
(Authorized Signature)_____
(Date)

If your application is denied and you believe that the decision was made in error, you may submit a request for an administrative hearing before the Office of the State Administrative Hearings by submitting a written request to the Department. Appellate procedures and rights in administrative hearings are governed by the Administrative Procedures Act, O.C.G.A. §50-13-1, et seq.